

Fill in this information to identify the case:

Debtor name Thunder International Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) 25-15229

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*..... \$ 1,863,628.83

1c. Total of all property:

Copy line 92 from *Schedule A/B*..... \$ 1,863,628.83

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 868,757.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 0.00

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 3,937,358.30

4. Total liabilities
Lines 2 + 3a + 3b

\$ 4,806,115.30

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>East West Bank</u>		<u>4225</u>	<u>\$0.00</u>
3.2. <u>Bank of America</u>		<u>8540</u>	<u>\$0.00</u>
3.3. <u>Bank of America</u>		<u>8582</u>	<u>\$39,242.83</u>
3.4. <u>Bank of America</u>		<u>4611</u>	<u>\$0.00</u>
3.5. <u>Bank of America</u>		<u>4598</u>	<u>\$0.00</u>
3.6. <u>Bank of America</u>		<u>4608</u>	<u>\$0.00</u>

4. Other cash equivalents (Identify all)

Debtor Thunder International Group, Inc.
Name

Case number (If known) 25-15229

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$39,242.83

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. Principal Real Estate Investors, Landlord \$616,000.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$616,000.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11b. Over 90 days old: 618,386.00 - 0.00 =... \$618,386.00
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$618,386.00

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.

Debtor Thunder International Group, Inc. Case number (If known) 25-15229
Name

☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Misc. office furniture	\$0.00		\$0.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software			
42.	Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$0.00
44.	Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45.	Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Warehouse equipment	\$0.00		\$590,000.00
51.	Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$590,000.00
52.	Is a depreciation schedule available for any of the property listed in Part 8? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
53.	Has any of the property listed in Part 8 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor Thunder International Group, Inc.
NameCase number (If known) 25-15229**Part 9: Real property****54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 19465-19485 E. Walnut Drive City of Industry, CA 91745	Lease	Unknown		Unknown
55.2. San Bernardino Airport 115 N. Del Rosa San Bernardino	Lease	Unknown		Unknown
55.3. 99 Caven Point Road Jersey City, New Jersey	Lease	Unknown		Unknown
55.4. 8828 Taub Road Houston, Texas 77064	Lease	\$0.00		\$0.00
55.5. 13428 N.E. Jarrett Street Portland, OR 97230	Lease	Unknown		Unknown
55.6. 360 Veterans Parkway Bolingbrook, IL 60440	Lease	Unknown		Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
 Copy the total to line 88.

\$0.00**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property**59. Does the debtor have any interests in intangibles or intellectual property?**

Debtor Thunder International Group, Inc. Case number (If known) 25-15229
Name

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites			
	<u>www.thundrex.com</u>	<u>\$0.00</u>		<u>\$0.00</u>
	<u>fulfillment.thunderex.com</u>	<u>\$0.00</u>		<u>\$0.00</u>
	<u>ship.thunderex.com</u>	<u>\$0.00</u>		<u>\$0.00</u>

62. Licenses, franchises, and royalties
63. Customer lists, mailing lists, or other compilations
64. Other intangibles, or intellectual property
65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor Thunder International Group, Inc. Case number (if known) 25-15229
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$39,242.83	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$616,000.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$618,386.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$590,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$1,863,628.83	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$1,863,628.83

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Case number (if known) 25-15229

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	De Lage Landen Financial Svcs, Inc. <small>Creditor's Name</small> 1111 Old Eagle School Rd Wayne, PA 19087 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,757.00	\$0.00

2.2	East West Bank <small>Creditor's Name</small> 9300 Flair Dr Fl 6th El Monte, CA 91731 <small>Creditor's mailing address</small> <small>Creditor's email address, if known</small> Date debt was incurred Last 4 digits of account number 0001 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$867,000.00	\$0.00
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Debtor Thunder International Group, Inc. Case number (if known) 25-15229
Name

2.3 U.S. Small Business Administration Describe debtor's property that is subject to a lien Unknown \$0.00

Creditor's Name
ATTN: District Counsel
Two Gateway Center, Suite
1002
Newark, NJ 07102

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes

Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$868,757.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

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United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) 25-15229

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address California Dept. of Tax and Fee Admin. P.O. Box 942879 Sacramento, CA 94279 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
2.2	Priority creditor's name and mailing address City of Atlanta, Office of Revenue 55 Trinity Ave SW Atlanta, GA 30303 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
2.3	Priority creditor's name and mailing address City of Jersey City 280 Grove Street Room 101 Jersey City, NJ 07302 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>

Debtor Thunder International Group, Inc. Case number (if known) 25-15229
Name

2.4	Priority creditor's name and mailing address City of Portland, Revenue Division 111 SW Columbia Street Suite 600 Portland, OR 97201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Cook County Treasurer 118 North Clark Street, Room 112 Chicago, IL 60602	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Georgia Dept. of Revenue PO Box 740319 Atlanta, GA 30374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.7	Priority creditor's name and mailing address Harris County Tax Assessor-Collector 1001 Preston St. Houston Texas 77002	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Illinois Department of Revenue PO Box 19035 Springfield, IL 62794	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor Thunder International Group, Inc. Case number (if known) 25-15229
Name

2.9 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00 \$0.00
Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101
☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

2.10 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00 \$0.00
Los Angeles Treasurer and Tax
Collector
500 W Temple Street
Los Angeles, CA 90012
☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

2.11 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00 \$0.00
NJ Division of Taxation
3 John Fitch Way, 5th Floor
PO Box 245
☐ Contingent
☐ Unliquidated
☐ Disputed

Trenton, NJ 08695

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

2.12 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00 \$0.00
Oregon Department of Revenue
PO Box 14725
☐ Contingent
☐ Unliquidated
☐ Disputed

Salem, OR 97309

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

2.13 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$0.00 \$0.00
State of Delaware, Division of
Revenue
820 N. French Street
☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington, DE 19801

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY
unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

Debtor	<u>Thunder International Group, Inc.</u>	Case number (if known)	<u>25-15229</u>
	Name		

2.14	Priority creditor's name and mailing address Texas Comptroller of Public Accounts P.O. Box 13528, Capitol Station <u>Austin, TX 78711</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00 \$0.00
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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address 99 Caven Point Road, LLC 400 Plaza Drive, PO Box 1515 Secaucus, NJ 07096 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$225,688.68</u>
3.2	Nonpriority creditor's name and mailing address Amazon P.O. Box 81226 Seattle, WA 98108 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,922.67</u>
3.3	Nonpriority creditor's name and mailing address Atech Network Service 6246 Reno Ave Temple City, CA 91780 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$387.60</u>
3.4	Nonpriority creditor's name and mailing address Cali Flower Capital, Inc. 815 Lakewood Rd Toms River, NJ 08755 Date(s) debt was incurred _____ Last 4 digits of account number <u>8540</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$89,950.00</u>
3.5	Nonpriority creditor's name and mailing address Charge Up Capital LLC 1706 Avenue M, Suite 2 Brooklyn, NY 11210 Date(s) debt was incurred <u>11/27/2024</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$202,981.00</u>
3.6	Nonpriority creditor's name and mailing address Covered California for Small Business P.O. Box 740167 Los Angeles, CA 90074 Date(s) debt was incurred _____ Last 4 digits of account number <u>2833</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$29,374.76</u>

Debtor Thunder International Group, Inc. Case number (if known) 25-15229
Name

3.7	Nonpriority creditor's name and mailing address ELZ Accountancy Corp 1930 S Brea Canyon Road, #150 Diamond Bar, CA 91765 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,000.00</u>
3.8	Nonpriority creditor's name and mailing address Essentia Funding 22 E Main St Unit 250 Middletown, NY 10940 Date(s) debt was incurred <u>02/12/2025</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$400,000.00</u>
3.9	Nonpriority creditor's name and mailing address Humana PO Box 4605 Carol Stream, IL 60197 Date(s) debt was incurred <u>04/19/2025</u> Last 4 digits of account number <u>8001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,501.08</u>
3.10	Nonpriority creditor's name and mailing address Industrial Park E. Sub A, LLC c/o Allen Matkins Leck Gamle Mallory & Natsis LLP 600 West Broadway, 27th Floor San Diego, CA 92101 San Diego, CA 92101 Date(s) debt was incurred <u>09/03/2020</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,114,799.84</u>
3.11	Nonpriority creditor's name and mailing address MoneyWell Group, LLC 111 Great Nock Rd, Suite 300 Great Neck, NY 11021 Date(s) debt was incurred <u>3/26/2025</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$270,000.00</u>
3.12	Nonpriority creditor's name and mailing address Overton Funding LLC 2802 North 29th Ave Hollywood, FL 33020 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$135,000.00</u>
3.13	Nonpriority creditor's name and mailing address Quick Funding Group, LLC dba Quick Funding Group 583 Grant Place Cedarhurst, NY 11516 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$300,000.00</u>

Debtor	Thunder International Group, Inc. <small>Name</small>	Case number (if known)	25-15229
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3.14	Nonpriority creditor's name and mailing address Reliance Financial FL LLC 2875 S Ocean Blvd Ste 200-004 Palm Beach, FL 33480 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$385,156.25
3.15	Nonpriority creditor's name and mailing address REYNOLD GROUPS INC 575 Route 28, Suite 110 Raritan, NJ 08869 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,635.00
3.16	Nonpriority creditor's name and mailing address San Bernardino International Airport 1601 East Third Street, Suite 100 San Bernardino, CA 92408 Date(s) debt was incurred <u>09/1/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$216,602.60
3.17	Nonpriority creditor's name and mailing address SH Distribution Center Owner LP 1000 N Post Oak Road, Suite 220 Houston, TX 77055 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,438.14
3.18	Nonpriority creditor's name and mailing address SoCal Gas PO Box C Monterey Park, CA 91756 Date(s) debt was incurred <u>02/19/2025</u> Last 4 digits of account number <u>5499</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.18
3.19	Nonpriority creditor's name and mailing address SoCal Gas PO Box C Monterey Park, CA 91756 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>5624</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15.78
3.20	Nonpriority creditor's name and mailing address Southern California Edison PO Box 300 Rosemead, CA 91772 Date(s) debt was incurred <u>04/10/2025</u> Last 4 digits of account number <u>8718</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,397.81
3.21	Nonpriority creditor's name and mailing address Summit RFG Corporation d/b/a Lease Administration Center 4680 Parkway Drive, Suite 300 Mason, OH 45040 Date(s) debt was incurred <u>08/02/2019</u> Last 4 digits of account number <u>7002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor Thunder International Group, Inc.
Name

Case number (if known) 25-15229

3.22	Nonpriority creditor's name and mailing address TD Auto Finance PO Box 16039 Lewiston, ME 04243 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$95.27</u>
3.23	Nonpriority creditor's name and mailing address Thriveway Funding Group LLC 2362 Norstrand Ave Brooklyn, NY 11210 Date(s) debt was incurred <u>2/4/2025</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$67,450.00</u>
3.24	Nonpriority creditor's name and mailing address Trace Insurance Services 8671 Wilshire Blvd #714 Beverly Hills, CA 90211 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,456.14</u>
3.25	Nonpriority creditor's name and mailing address U.S. Department of Homeland Security 2707 Martin Luther King Jr Ave SE Washington, DC 20528 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,380.00</u>
3.26	Nonpriority creditor's name and mailing address UPS 55 Glenlake Pkwy NE Atlanta, GA 30328 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$12,366.64</u>
3.27	Nonpriority creditor's name and mailing address Valley Vista Services, Inc. 17445 Railroad St City of Industry, CA 91748 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,987.40</u>
3.28	Nonpriority creditor's name and mailing address Veterans Corporate Center LLC Prologis 6250 North River Road, Suite 1100 Des Plaines, IL 60018 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$104,509.56</u>
3.29	Nonpriority creditor's name and mailing address Walnut Valley Water District 271 South Brea Canyon Road Walnut, CA 91789 Date(s) debt was incurred <u>04/09/2025</u> Last 4 digits of account number <u>0849</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,593.87</u>

Debtor Thunder International Group, Inc.
Name

Case number (if known) 25-15229

3.30	Nonpriority creditor's name and mailing address Walnut Valley Water District 271 South Brea Canyon Road Walnut, CA 91789 Date(s) debt was incurred <u>04/09/2025</u> Last 4 digits of account number <u>7031</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$805.34</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address Waste Management of Illinois, Inc. IL Ottawa Hauling PO Box 3020 Monroe, WI 53566 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,501.91</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address Westwood Funding Solutions LLC 4601 Shreidan St 501 Hialeah, FL 33014 Date(s) debt was incurred <u>11/24/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$282,000.00</u> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Wordwide Express 2700 Commerce Street Suite 1500 Dallas, TX 75226 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,809.08</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address Workforce Enterprises, Inc. 499a Smith St. Perth Amboy, NJ 08861 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$384.70</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>0.00</u>
5b. +	\$ <u>3,937,358.30</u>
5c.	\$ <u>3,937,358.30</u>

Fill in this information to identify the case:

Debtor name Thunder International Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) 25-15229

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest Building: 99 Caven Point Road, Jersey City, NJ

State the term remaining

Expires: 1/31/2026

99 Caven Point Road, L.L.C.

400 Plaza Drive

List the contract number of any government contract

P.O. Box 1515

Secaucus, NJ 07096-1515

2.2. State what the contract or lease is for and the nature of the debtor's interest Toyota Lift - Model 8FGCU25

State the term remaining

List the contract number of any government contract

Carruth-Doggett, Inc.

7110 North Fwy

Houston, TX 77076

2.3. State what the contract or lease is for and the nature of the debtor's interest Building: 19465-19485 E. Walnut Drive, Industry, California

State the term remaining

4/30/2026

Industrial Park E SUB A, LLC

c/o Allen Matkins Leck Gamble Mallory & Natsis LLP

600 West Broadway, 27th Floor

List the contract number of any government contract

San Diego, CA 92101

2.4. State what the contract or lease is for and the nature of the debtor's interest Building No. 56, Suite A, located at 115 N. Del Rosa, San Bernardino, CA

State the term remaining

Expires: 12/31/2030

List the contract number of any government contract

San Bernardino International Airport

1601 East Third Street, Suite 100

San Bernardino, CA 92408

Debtor 1 Thunder International Group, Inc.

First Name

Middle Name

Last Name

Case number (if known) 25-15229

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest Building 3, located at 8828 Taub Road, Houston, TX 77064

State the term remaining Expires: 05/01/2027

List the contract number of any government contract _____

SH Distribution Center Owner LP
Cabot Properties Property Management, LP
c/o Rachel Haas
1000 N Post Oak Road
Suite 220
Houston, TX 77055

2.6. State what the contract or lease is for and the nature of the debtor's interest BYD ECB "Comfort" Forklift

State the term remaining

List the contract number of any government contract _____

Summit RFG Corporation
4680 Parkway Drive, Suite 300
Mason, OH 45040

2.7. State what the contract or lease is for and the nature of the debtor's interest Building: Bolingbrook 19, 360 Veterans Parkway Bolingbrook, IL 60440

State the term remaining Expires: 01/31/2027

List the contract number of any government contract _____

Veterans Corporate Center LLC
Prologis
6250 North River Rd, Suite 1100
Des Plaines, IL 60018

Fill in this information to identify the case:Debtor name Thunder International Group, Inc.United States Bankruptcy Court for the: DISTRICT OF NEW JERSEYCase number (if known) 25-15229☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.**1. Do you have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**Column 1: Codebtor****Column 2: Creditor**

Name	Mailing Address	Name	Check all schedules that apply:
2.1 Mimgming Wang	19465 East Walnut Drive North Walnut, CA 91789	Thriveway Funding Group LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.24</u> <input type="checkbox"/> G _____
2.2 Mimgming Wang	19465 East Walnut Drive North Walnut, CA 91789	Westwood Funding Solutions LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.33</u> <input type="checkbox"/> G _____
2.3 Mimgming Wang	19465 East Walnut Drive North Walnut, CA 91789	Charge Up Capital LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
2.4 Mimgming Wang	19465 East Walnut Drive North Walnut, CA 91789	Essentia Funding	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
2.5 Mimgming Wang	19465 East Walnut Drive North Walnut, CA 91789	Quick Funding Group, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.13</u> <input type="checkbox"/> G _____
2.6 U.S. Small Business Administration	ATTN: District Counsel Two Gateway Center, Suite 1002 Newark, NJ 07102 Guarantor	East West Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor Thunder International Group, Inc.

Case number (if known) 25-15229

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.7	Ye Feng	19465 East Walnut Drive North City of Industry, CA 91789	Thriveway Funding Group LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.24</u> <input type="checkbox"/> G _____
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2.8	Ye Feng	19465 East Walnut Drive North City of Industry, CA 91789	Westwood Funding Solutions LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.33</u> <input type="checkbox"/> G _____
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2.9	Ye Feng	19465 East Walnut Drive North City of Industry, CA 91789	Charge Up Capital LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
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2.10	Ye Feng	19465 East Walnut Drive North City of Industry, CA 91789	Essentia Funding	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
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2.11	Ye Feng	19465 East Walnut Drive North City of Industry, CA 91789	Quick Funding Group, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.13</u> <input type="checkbox"/> G _____
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Fill in this information to identify the case:

Debtor name Thunder International Group, Inc.

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number (if known) 25-15229 (JKS)

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 29, 2025

x



Signature of individual signing on behalf of debtor

Mingming Wang
Printed name

Secretary, Thunder International Group, Inc.
Position or relationship to debtor